INVOICE

Remit to:

Customer Name CITY OF CARSON O

2929 M. Customer Number

Invoice Number 202847AL

Invoice Date 03-04-20 ARDept/BPRO Due Date 05-03-20 SH: CCLE Revenue Source Tax ID 9317 95-6000927 Amount Due Amount Enclosed

Bill to:

P.O. Box 512816 Los Angeles CA

LA County Sheriff's Department

CITY OF CARSON ATTN: ACCOUNTS PAYABLE 701 E CARSON ST

90051-0816

First Supervisorial District

CARSON CA 90745 Payment Method: Check Money Order

Please write Invoice No on front of check or Money Order. DO NOT MAIL CASH

\$1,900.76

Please check if address has changed.Write correct address on back of stub and attach with payment

Please detach the above stub and return with your remittance payable to LA County Sheriff's Department



Sheriff ORIGINAL

Servic	e From	Service To	Unit	Unit Name	8	Customer	Numbe	er	Invoice Numbe	r	Invoice Date
01-01-	20	01-31-20	75766	Carson Si Cities	tation-Contract	508690			202847AL		03-04-20
Invoic	charg	6.5									
Ref Line No.	Servic Code	e	Service		Description	Liab	Ins	Actual Service Units	Unit Price		Charges/Credit
1	337	Helicop	ter Svc - I	Hrly (CC)	HELICOPTER SERVIC FOR JANUARY 2020.	<u>e</u>					\$1,712.40
2					11% LIABILITY INSURANCE						\$188.36
									Subtotal		\$1,900.76

Other Charges									
Description		Charges							
	TOTAL OTHER Charges	-мінипация и «почет дистичностичной з в го « пря тэметиция исполоми от							

Credit Payments Applied \$0.00 Total Amount Due By 05-03-20 \$1,900.76

Please include your invoice number on all payments. MAKE CHECK PAYABLE TO: LOS ANGELES COUNTY SHERIFF'S DEPARTMENT P.O. Box 512816, Los Angeles, CA 90051-0816. Direct Inquiries to: 211 W. Femple St, 6th floor, Los Angeles, CA 90012 (213) 229-3324

Alice Liu yaliu@lasd.org 213->29-3348 05/04/20